PTO/SB/22 (12-04)
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)			Docket Number (Optional)			
(Fees pursuant to the	FY 2005 Consolidated Appropriations Act, 20	005 (H.R. 4818).)	. 5/8	762000100		
Application Number	10/086,973		Filed	March 1, 2002		
For METHODS A	ND COMPOSITIONS FOR DELIV	ERY OF PHARM	IACEUTICAL AGEN	NTS .		
Art Unit 1635			Examiner	R. Schnizer		
identified application.	er the provisions of 37 CFR 1.136 sion and fee are as follows (check			1 85 5		
The requested exten	sion and lee are as lonows (check	_				
One mor	nth (37 CFR 1.17(a)(1))	<u>Fee</u> \$120	Small Entity Fee \$60	<u>\$</u>		
X Two mor	nths (37 CFR 1.17(a)(2))	\$450	\$225	\$ 225.00		
Three m	onths (37 CFR 1.17(a)(3))	\$1020	\$510	\$		
Four mo	nths (37 CFR 1.17(a)(4))	\$1590	\$795	\$		
Five mor	nths (37 CFR 1.17(a)(5))	\$2160	\$1080	\$		
X Applicant clair	ms small entity status. See 37 CF	R 1.27.				
\	amount of the fee is enclosed.					
Payment by c	redit card. Form PTO-2038 is atta	ached.				
	nas already been authorized to ch		application to a Dep	osit Account.		
	s hereby authorized to charge any	fees which may have enclose	be required, or cred d-a duplicate copy of m (PTO/SB/17) is a	dit any overpayment, to of this sheet. Fee		
I am the	applicant/inventor.					
	assignee of record of the entire Statement under 37 CFR 3.			š).		
x	attorney or agent of record. Reg	gistration Number	40,030			
	attorney or agent under 37 CFR Registration number if acting und			•		
lil	1 a. Sacolnon		Decem	nber 22, 2004		
7	Signature			Date		
	Jill A. Jacobson) 813-5876		
	Typed or printed name		Teleph	none Number		
NOTE: Signatures of all than one signature is req	the inventors or assignees of record of the enquired, see below.	tire interest or their repre	esentative(s) are required.	Submit multiple forms if more		
X Total of	1 forms are submitted	d.				

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Effective on 12/08/2004.

S pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

Application Number

Description

Application Number

**App

Effective on 12/08/2004. ees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete ii raioiiii			
		Application Number	10/086,973		
For FY 2005		Filing Date	March 1, 2002		
		First Named Inventor	Kesavan ESUVARANATHAN R. Schnizer 1635		
		Examiner Name			
		Art Unit			
TOTAL AMOUNT OF PAYMENT	(\$) 225.00	Attorney Docket No.	578762000100		

Utility 300 150 500 250 200 100 0.00 Design 200 100 100 50 130 65 0.00 Plant 200 100 300 150 160 80 0.00 Reissue 300 150 500 250 600 300 0.00 Provisional 200 100 0 0 0 0 0.00	TOTAL AMOUNT OF PAYMENT	T (\$) 225.00 Attorney Docket No. 578762000100		0					
No prosit Account Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP	METHOD OF PAYMENT (check	all that apply)						·.	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) X Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee X Charge any additional fee(s) or any underpayment of X Credit any overpayments	Check Credit Card	Money Order	Nor	Other (please ide	ntify):			
X Charge fee(s) indicated below X Charge fee(s) indicated below, except for the filling fee X Charge any additional fee(s) or any underpayment of fee(s) X Credit any overpayments X Credit any over	x Deposit Account Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foers							Р	
Charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.16 and 1.17 FEE CALCULATION	For the above-identified depo	sit account, the [Director is	hereby authorize	ed to: (ch	eck all that apply))		
FEE CALCULATION FEES STARCH FEES STARCH FEES Fee (\$) Fee (\$)	x Charge fee(s) indicated	below		Charg	e fee(s) i	ndicated below, e	xcept for th	e filing fee	
Second Search AND EXAMINATION FEES SEARCH FEES Small Entity Small Ent	Charge any additional f fee(s) under 37 CFR 1	ee(s) or any unde .16 and 1.17	erpaymen	t of X Credit	any over	payments			
Name	FEE CALCULATION								
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Design 200 100 100 50 130 65 0.00 Plant 200 100 300 150 160 80 0.00 Reissue 300 150 500 250 600 300 0.00 Provisional 200 100 0 0 0 0 0 0 Provisional 200 100 0 0 0 0 0 0 2. EXCESS CLAIM FEES	Application Type Fee (\$		Fee (\$		Fee (\$		Fees P	aid (\$)	
Plant	Utility 300	150	500	250	200	100	0.	00	
Reissue 300 150 500 250 600 300 0.00 Provisional 200 100 0 0 0 0 0.00 2. EXCESS CLAIM FEES Small Entity Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25 Each independent claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Multiple dependent claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Bee Paid (\$) 180.00 0.00 Jana Claims Extra Claims Fee (\$) Fee Paid (\$) Fee Paid (\$) 180.00 0.00 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) Fee \$1 in the paper (\$) Fee \$3 in the paper (\$) Fee \$3 in the paper (Design 200	100	100	50	130	65	0.	0.00	
Provisional 200 100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Plant 200	100	300	150	160	80	0.	0.00	
2. EXCESS CLAIM FEES Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims 50 180 Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims 58 -65 = 0 x 25.00 = 0.00 Fee (\$) Fee Paid (\$) 180.00 0.00 Indep. Claims Extra Claims Fee (\$) Fee (\$) Fee Paid (\$) 1 -5 = 0 x 100.00 = 0.00 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)	Reissue 300	150	500	250	600	300	0.	0.00	
Fee S Fee S Fee S	Provisional 200	100	0	0	0	0	0.	00	
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Other: 2252 Extension for response within second month 225.00	Non-English Specification, \$130 fee (no small entity discount)								
	Other: 2252 Extension for response within second month . 225.00					5.00			

SUBMITTED BY						
Signature	In a Sassism		Registration No. (Attorney/Agent)	40,030	Telephone	(650) 813-5876
Name (Print/Type)	Jill A. Jacobson			. 4	Date	December 22, 2004